PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

Application or Docket Number

10/536954

| | | CLAIMS | AS FILED | - PART | ı | - | | SMALL EN | TITY | | OTUES | T1144 |
|---|---|---|-------------------------------|--|------------------|------------------------------------|-----|---------------------|------------------------|------|-------------------------|------------------------|
| | | | (Colu | mn 1) | | | | TYPE | | OR | OTHER THAN SMALL ENTITY | |
| U.S. NATIONAL STAGE FEES | | | 6 | 23 | | | 7 | RATE | FEE | 1 | RATE | FEE |
| ва | SIC FEE | | SMALL EN | ALL ENT. = \$ 150 LAF | | RGE ENT. = \$ 300 | 1 | BASIC FEE. | 150 | OR | BASIC FEE | - |
| EX | AMINATION FI | E | | Satisfies PCT Article 33(1)- Al | | other situations = \$ 100 / \$ 200 | 1 | EXAM. FEE | 100 | | EXAM. FEE | <u> </u> |
| SEA | ARCH FEE | | U.S. is ISA = ALL other of | U.S. is ISA = \$50 / \$100 ALL other countries = \$200 / \$400 | | other situations = \$ 250 / \$ 500 | | SEARCH FEE | 200 | | SEARCH FEE | <u> </u> |
| FEE | FOR EXTRA | SPEC. PGS. | | minus 100 = | | / 50 = | 1 | X \$ 125 = | | | X \$ 250 = | |
| тот | TAL CHARGEA | BLE CLAIMS | 23 | 23 minus 20 = . | | 3 | 1 | X \$ 25 = | 75 | OR | X \$ 50 = | |
| IND | EPENDENT CL | AIMS | 3 minus 3 = * | | * | | | X \$ 100 = | , | OR | X \$ 200 = | |
| MUL | TIPLE DEPEN | DENT CLAIM PR | ESENT | ^/ | · | | | + \$ 180 = | | OR | + \$ 360 = | · · · · · · |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | olumn 2 | 1 1 | TOTAL | 525 | OR | TOTAL | |
| 1 | | | | | | | | | | | | |
| - | CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) | | | | | | | SMALL ENTITY | | | OTHER THAN SMALL ENTITY | |
| AMENDMENT A | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHI NUME PREVIO PAID I | BER USLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * | Minus | ** | | = | | X \$ 25 = | | OR | X \$ 50 = | |
| | Independent | * | Minus | *** | | = | | X \$ 100 = | | OR | X \$ 200 = | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | İ | + \$ 180 = | | OR | + \$ 360 = | |
| | | | | | | | L | TOTAL ADDIT. FEE | | OR . | TOTAL ADDIT. FEE | |
| | | (Column 1) | | (Column 2) (Column 3) | | | | | | | | |
| AMENDMENT B | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHE NUMB PREVIOU PAID F | ST ER JSLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * | Minus | ** | | = | ſ | X \$ 25 = | | OR | X \$ 50 = | |
| | Independent | * | Minus | *** | : | = | ŀ | X \$ 100 = | | OR | X \$ 200 = | · · |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | f | + \$ 180 = | ٠ | OR | + \$ 360 = | · · · · |
| | | | | | | | | TOTAL ADDIT. FEE | | L | TOTAL ADDIT. | |
| | | | | | | | | rec <u>L</u> | | | FEE L | |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. | | | | | | | | | | | | |